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DEPARTMENT OF NURSING EDUCATION

IN CHARGE OF

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The collaborators in this department will be glad to receive short items of interest relating to the field of training-school work. States east of the Mississippi¹ should send their contributions to S. Lillian Clayton, Philadelphia General Hospital, Philadelphia, and those west of that section to Anna C. Jammé, Board of Health, Sacramento, California.

THE CURRICULUM

(Continued from page 512)

The suggested scheme of instruction which follows has been recommended, in its main features, by the National League of Nursing Education. This will be published in much fuller detail within a short time and it is hoped that it may serve as a guide to those who are working toward a better-balanced and more adequate course of instruction.

GENERAL SCHEME OF INSTRUCTION

PREPARATORY OR FIRST YEAR

First half—October 1 to January 31

<i>Theory</i>	<i>Hours</i>	<i>Practice</i>	<i>Months</i>
Anatomy and Physiology.....	60	Practical work not exceeding 4	
Bacteriology.....	20	hours daily, giving training in	
Hygiene.....	10	Household Economy, Cookery,	
Elements of Chemistry and		Elementary Nursing, and prep-	
Physics.....	20	aration of simple drugs and	
Cookery and Nutrition.....	60	solutions in such departments	
Household Economy.....	15	as the Nurses Home, Sewing	
Drugs and Solutions.....	20	and Linen Rooms, Laundry,	
Elementary Nursing (including		Pharmacy, Surgical Supply	
bandaging).....	60	Room, Dispensary (including	
History and Ethics of Nursing..	10	a few visits to patients' homes	
Social and Economic Causes of		with Social Service worker or	
Disease.....	5	Visiting Nurse), and General	
	—	Wards.	
Total (About 3 hours daily)	280 hrs.	Total	4 mos.

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Second half—February 1 to May 31

	<i>Hours</i>		<i>Months</i>
Elements of Pathology.....	10	Practical work, 7 to 8 hours daily,	
Medical Nursing.....	20	mainly in—	
Surgical Nursing.....	20	General medical services.	
Materia Medica.....	20	General surgical services.	
Massage.....	10	With summer term (allow-	
		ing 1 month vacation).	
Total (About 5 hours weekly)	80 hrs.		Total 7 mos.

JUNIOR OR SECOND YEAR

First half—October 1 to January 31

	<i>Hours</i>		<i>Months</i>
Gynecological Nursing.....	10	Practical work 8 hours daily,	
Orthopedic Nursing (with exer-		mainly in—	
cises).....	10	Gynecological service.	
Nursing in Diseases of Infants		Orthopedic service.	
and Children.....	20	Children's service, (including	
Advanced Dietetics (Infant Feed-		Milk Room).	
ing, etc.).....	20		
Total (About 4 hours weekly)	60 hrs.		Total 4 mos.

Second half—February 1 to May 31

	<i>Hours</i>		<i>Months</i>
Operating Room Technic.....	10	Operating-room service.	
Obstetrical Nursing.....	20	Obstetrical service.	
Nursing in Communicable Dis-		Infectious service.	
eases.....	20	Eye, ear, nose and throat service.	
Nursing in Diseases of the Eye,			
Ear, Nose and Throat.....	10		
Total (About 4 hours weekly)	60 hrs.	(With summer term) Total	7 mos.

SENIOR OR THIRD YEAR

First half—October 1 to January 31

	<i>Hours</i>		<i>Months</i>
Nursing in Mental and Nervous		Practical work, 8 hours daily in—	
Diseases.....	20	Psychopathic service (or	
Nursing in Special Diseases,		nursing of nervous diseases).	
(Skin, Occupational and Ve-		Private Wards.	
neral Diseases).....	10	Dispensary Service (with special	
Special Therapeutics.....	10	diseases—Skin, etc.).	
Municipal Sanitation and Public			
Health.....	10		
Modern Developments in Nurs-			
ing.....	10		
Total (4 hours weekly)	60 hrs.		Total 4 mos.

Second half—February 1 to May 31

	<i>Hours</i>	<i>Months</i>
Modern Social Problems.....	10	Additional special training in one of above branches.
Professional Problems.....	10	
Reviews, (Including Adaptations of Nursing Technic and First Aid).....	20	Special experience (not to exceed 3-4 months in one of following: Assistant to Head Nurse. Specializing Patients in Hospital, or Assistant in Social Service Department, or Assistant in Visiting Nursing.
Case Studies, (specializing in any of the above subjects).....	10	
Introduction to Special Branches (any one)		
Institutional Housekeep- ing. Private Nursing.....	10	
Public Health Nursing.....		
	—	
Total	60 hrs.	(With summer term) Total 7 mos.

This gives a total of 600 hours theory (of which about one-half is spent in laboratory or practice work in the class-room) and 33 months of experience in the wards of the hospital. At the lowest possible estimate (54 hours a week) and counting one month vacation each year, this gives us a total of over 7000 hours of practical work, so we need as yet have no fear that we are over-burdening the curriculum on the side of theoretical work. Six hundred hours would be about equivalent in time to one school year in an ordinary technical or professional school or college. This would not seem to be a very liberal allowance of theory for a woman who is preparing for an important branch of professional work.

In the above courses, it is understood that the laboratory method will be used as extensively as possible, especially in teaching the sciences such as Anatomy and Physiology, Bacteriology, and Chemistry, or the practical subjects such as Nursing, Cooking, and Massage. It can generally be assumed in all such courses that about half the time will be given to lecture, class and quiz, and about half to laboratory, demonstration, or practice work. The main exception would be such courses as Hygiene, History of Nursing, Modern Social Problems, etc., where the work would be almost entirely lecture or class work.

In all courses dealing with nursing in special diseases, such as Medical and Surgical Nursing, Obstetrical Nursing, Infants and Children, etc., the plan followed has been to divide the time about equally between lectures or clinics by physicians, and classes with nursing demonstrations by nurses. Thus in Medical Nursing (20 hours), ten hours would be given to medical diseases and ten to medical nursing.

In the standard curriculum, a fuller preparatory course will be outlined, where the pupils are freed entirely from hospital duties for the

first four months. Only a few hospitals have been able to adopt this method, but it will probably come into wider use in the future, especially as pupil nurses become accustomed to the idea of paying for this part of their training.

In adapting such a curriculum as this to the needs of individual schools, it may be necessary to reduce the number of hours in the beginning. It is suggested that this reduction should be made by taking an equal proportion, say one-half or three-fifths of the hours assigned to each course. Similarly in increasing the total number of hours the general proportion could be maintained.

The Visiting Nurse Association of Philadelphia has established a model district for the purpose of giving nurses from the various training schools experience in visiting nursing. It is in charge of a supervisor who gives these nurses both theoretical and practical instruction and supervises their work in the district. The nurses are expected to serve 6 to 8 hours daily, with opportunity to return to their respective training schools for the theoretical work of their own curriculum. Some of the hospitals have accepted this opportunity to better prepare their nurses to meet the demands made upon them by the public, and it is felt that as soon as the State Board of Examiners includes in the examinations, questions covering public health and social service problems, a greater number of the hospitals will take advantage of this opening.

Some of the Philadelphia training schools are making a special effort to have their pupils attend lectures and demonstrations in other schools and to have superintendents from other schools talk to their pupils, the object being to broaden the interests of the student, thus breaking down some of the narrow school prejudice existing in most training schools.

Another example of affiliation between the training school and the technical school is seen in one of the hospitals, where the students from the latter spend a certain number of hours weekly in the wards of the hospital for their practice work in Invalid Occupation. The pupils of the training school practice side by side with these students and receive their regular instruction in this subject from the Invalid Occupation Instructor of the hospital, who supervises and directs both groups. This plan makes it possible to reach more patients, as well as being an excellent means of instruction for the nurse and for the technical student, and is one more evidence of the opportunity the hospital has as an educational center.

The Business Woman's League of Philadelphia has asked to have a

course in Home Nursing started. The League of Nursing Education will be responsible for the teaching of this course and believes that such courses of instruction to the public should be standardized throughout the country.

The Superintendent of Nurses of the Michael Reese Hospital in Chicago, writes:

I am sure you will be interested to know that through the generosity of the individual directors of the school we are having Susan Tracy here for three months. Miss Tracy is teaching the subject of Invalid Occupations every day for two hours, so that thirty of our pupils, in sections of ten, will have four hours a week with her during the three months of her stay. She is also spending two hours every morning in our wards. The work in the hospital is more or less experimental, but the patients seem to be already enthusiastic. If the work proves to be worth while here, we are planning to put it on a permanent basis with one of our older graduates in charge.

In many ways the most eventful and far-reaching movement which has taken place in the field of nursing education in many years, was launched by the alumnae association of the Johns Hopkins Training School last December. For the first time in history, the graduates of a training school for nurses have committed themselves to the task of securing an endowment ample enough to put the educational work of their school on a substantial and independent financial basis.

In outlining the purpose of the endowment fund, Miss Nutting, the chairman of the Committee, took the position that the present relationship of training schools to hospitals is fundamentally unsound, and that most of the disabilities under which nursing schools labor can be traced back to this fact. The hospital, supported as it is (and always inadequately) by public funds, is compelled to meet what it considers to be the most urgent needs of the whole institution and even with the most generous appreciation of the needs of the training school, the amount which the trustees feel they can afford to appropriate for educational work is usually entirely inadequate. This is true even in such highly favored schools as the Johns Hopkins, where the Board has always maintained the deepest interest in the training school and has endeavored in every way to dignify and further its work.

The Fund starts auspiciously with two thousand-dollar subscriptions and with a number of yearly pledges of from fifty to two hundred dollars, all from members of the Johns Hopkins Alumnae. A million dollar endowment is an immense sum to raise, but with such leadership and with such a spirit of enthusiasm there is no doubt whatever that eventually that amount will be secured. Other alumnae asso-

ciations are following, the Massachusetts General and the Illinois training schools having already begun plans for a similar fund. A new era begins to dawn for training schools.

The Nurses' Registration Bureau of the California State Board of Health, Sacramento, has recently issued a very useful and interesting pamphlet which is designed to help the schools throughout the state in improving and standardizing their nursing technic. The pamphlet prepared by Anna C. Jamme is fully illustrated, and will be found very helpful to all teachers of nurses, following the example of the New Jersey State Board of Examiners which published a somewhat similar pamphlet several years ago which can be secured by those outside the state for the sum of fifty cents.

WOMEN SUPERINTENDENTS

Four states have women as superintendents of Public Instruction. They are Wyoming, Colorado, Washington and Idaho. In Montana all the county superintendents are women. About one-half of the same officials in Kansas are women and in California over one-half its county superintendents are women. In all these states women are voters and can use their votes for the benefit of the schools. That is one reason why the per cent of intelligence in these states ranks higher than in the South. Why shouldn't women teachers fit themselves for every position of school control. Especially should women have the vote on questions relating to the school life of children. The West has been quick to recognize the merits of its women and this may be the principal reason why it has gone so far in advance of other sections of the country. It surely cannot be because Western women are cleverer than others, but must be because their opportunities are greater. The vote is a great factor in individual progress as well as in state affairs, and Western women have shown how well they can use the vote.

WOMEN AS NATIONAL DELEGATES

An unusually large number of women will be seated as delegates at the National Democratic and Republican Conventions. California has elected three women to the Democratic Convention and Kansas will have several. Doubtless the other woman suffrage states will have a proportionate representation of men and women assisting in the nomination of presidential candidates.